

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: REGULAR
Subject Matter:: UTILITY
Suggested Group Art Unit:: 1635
CD-ROM or CD-R?:: NONE
Sequence Submission?:: PAPER
Title:: COMPOSITION AND METHOD FOR IN VIVO AND IN VITRO ATTENUATION OF GENE EXPRESSION USING DOUBLE STRANDED RNA

Attorney Docket Number:: 275.00030103
Total Drawing Sheets:: 8
Small Entity?:: YES
Licensed US Govt. Agency:: United States Public Health Service
Contract or Grant Numbers:: HL36059, HL51533, HD17063

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: People's Republic of China
Status:: FULL CAPACITY
Given Name:: Yin-Xiong
Family Name:: Li
City of Residence:: Augusta
State or Province of Residence:: GA
Country of Residence:: USA
Street of Mailing Address:: 1011 Hickman Road
City of Mailing Address:: Augusta
State or Province of Mailing Address:: GA
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 30904

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: USA
Status:: FULL CAPACITY
Given Name:: Michael
Middle Name:: J.
Family Name:: Farrell

City of Residence:: Canoga Park
 State or Province of Residence:: CA
 Country of Residence:: USA
 Street of Mailing Address:: 7043 Laramie Avenue
 City of Mailing Address:: Canoga Park
 State or Province of Mailing Address:: CA
 Country of Mailing Address:: USA
 Postal or Zip Code of Mailing Address:: 91036

Applicant Authority Type:: INVENTOR
 Primary Citizenship Country:: USA
 Status:: FULL CAPACITY
 Given Name:: Margaret
 Middle Name:: J.
 Family Name:: Kirby
 City of Residence:: Augusta
 State or Province of Residence:: GA
 Country of Residence:: USA
 Street of Mailing Address:: 2301 Laurel Lane
 City of Mailing Address:: Augusta
 State or Province of Mailing Address:: GA
 Country of Mailing Address:: USA
 Postal or Zip Code of Mailing Address:: 30904

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 26813

REPRESENTATIVE INFORMATION

Representative Customer Number:: 26813

DOMESTIC PRIORITY INFORMATION

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|--------------------|----------------------|----------------------|
| This Application | Continuation of | 10/038,984 | 01/04/02 |
| 10/038,984 | Continuation of | 09/493,301 | 01/28/00 |
| 09/493,301 | Non-Provisional of | 60/117,635 | 01/28/99 |
| 09/493,301 | Non-Provisional of | 60/175,440 | 01/11/00 |

ASSIGNMENT INFORMATION

Assignee Name:: Medical College of Georgia Research Institute, Inc.
Street of Mailing Address:: 1120 15th Street
City of Mailing Address:: Augusta
State or Province of Mailing Address:: GA
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 30912